FORM D

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION

FORM D

Washington, D.C. 20549

OMB APPROVAL						
OMB Number:	3235-0076					
Expires:	`					
Estimated averag	e burden					
hours per respons	se 16.00					

SEC USE ONLY

DATE RECEIVED

Prefix

140/363

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6) AND/OR

SECTION 4(0), AND/OR	Divice Headers
UNIFORM LIMITED OFFERING EXEM	PTION
lame of Offering (check if this is an amendment and name has changed, and indicate change.)	
DZOjnvest, LLC /	
iling Under (Check box(es) that apply): Rule 504 Rule 505 P Rule 506 Section 4(6)	D ULOE RECEIVED
ype of Filing: New Filing 🗹 Amendment	
A. BASIC IDENTIFICATION DATA	007 0 1 2007
Enter the information requested about the issuer	001-0-1-2007
ame of Issuer (check if this is an amendment and name has changed, and indicate change.)	
ZOinyest, LLC	186
ddress of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1 Prince Street, Apt. 3, New York, New York 10012	(917) 623-3080
ddress of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
f different from Executive Offices) PROCESSED	
rief Description of Business	
OCT 1 5 2007	
THOMSON	
OC OF DUNINGSS CITEDUITATION	100 100 100 100 100 100 100 100 100 100
corporation limited partnership, already formed FINANCIA ther ()	1 18818 8811 1881 11 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881
Month Year	ability Company
ctual or Estimated Date of Incorporation or Organization: 05 77 ZActual Estivation of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	U1 -
ENERAL INSTRUCTIONS	
deral:	
The Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D (Id(6)).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
then To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be hich it is due, on the date it was mailed by United States registered or certified mail to that address.	
here To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	9549.
opies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manual otocopies of the manually signed copy or bear typed or printed signatures.	ly signed. Any copies not manually signed must be
formation Required: A new filing must contain all information requested. Amendments need only reportereto, the information requested in Part C, and any material changes from the information previously supput be filed with the SEC.	ort the name of the issuer and offering, any changes lied in Parts A and B. Part E and the Appendix need
ling Fee: There is no federal filing fee.	
ate:	•
his notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for s LOE and that have adopted this form. Issuers relying on ULCE must file a separate notice with the see to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for secondary this form. This notice shall be filed in the appropriate states in accordance with state law.	Securities Administrator in each state where sales or the exemption, a fee in the proper amount shal

ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

this notice and must be completed.

A. BASIC IDENTIFICATION DATA		
2. Enter the information requested for the following:		
• Each promoter of the issuer, if the issuer has been organized within the past five years;		
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10 	0% or more of a clas	s of equity securities of the issuer.
Each executive officer and director of corporate issuers and of corporate general and managin	g partners of partne	rship issuers; and
• Each general and managing partner of partnership issuers.		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director [General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director [General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer] Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		

		·			B. 1!	NFORMAT	ON ABOU	T OFFERI	NG				
1	Una tha	icenes col	d, or does t	ha issuar i	stend to se	ll to non-a	ccredited i	nvestors in	this offeri	no?		Yes	No
1.	nas ine	1920ct 201	u, or uoes t			n, to non-a Appendix,							<u>1</u>
2.	What is	the minin	num investn									s	
												Yes	No
3. 4		-	permit join										
-	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Ful	l Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (N	lumber and	l Street, Ci	ty, State, Z	ip Code)						<u> </u>
Nar	me of Ass	sociated B	roker or De	aler		•			-				-
Stat	, .		Listed Has										
	(Check	"All State:	s" or check	individual	States)			•••••	*****************	***************************************	***************************************	☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Fúli	l Name (l	Last name	first, if indi	ividual)				·					
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)		•				
Nar	ne of Ass	sociated Bi	roker or De	aler								<u>.</u>	
Stat	tes in Wh	ich Persor	Listed Has	s Solicited	or Intends	to Solicit l	Purchasers					,	
	(Check	"All State:	s" or check	individual	States)			**!**********	·····	***************************************	••••••••	☐ Al	l States
	IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Fuli	l Name (I	Last name	first, if ind	ividual)									
Bus	iness or	Residence	: Address (1	Number an	d Street, C	ity, State, 2	Lip Code)						
Nan	ne of Ass	sociated Br	oker or De	aler			· · · · · · · · · · · · · · · · · · ·			•••			
Stat	tes in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit I	urchasers						<u>.</u>
	(Check	"All States	or check	individual	States)	•••••	,.,	····		*******************************		☐ AI	l States
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and				
	Type of Security		gregate ing Price	Amo	ount Aiready Sold
	Debt	t	N/A	\$	N/A
	Equity		N/A	\$ \$	N/A
	Equity	>	и/в	J	11723
	Convertible Securities (including warrants)	r	N/A	s	N/A
	· · · · · · · · · · · · · · · · · · ·				
	Partnership Interests			\$	<u>N/A</u> 425,000
	Other (Specify LLC Membership unit interests)	. 00	<u> </u>	\$	00 425,000
	Total	<u> </u>		\$_0.0	
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				Aggregate
			mber estors		llar Amount Purchases
	Accredited Investors		1	s	425,000
	Non-accredited Investors			\$	
1	Total (for filings under Rule 504 only)				*
	Answer also in Appendix, Column 4, if filing under ULOE.			*	
j 3 .	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.				
	Type of Offering		pe of curity	Do	ollar Amount Sold
	Rule 505			\$	
	Regulation A			\$	
	Rule 504			\$	
	Total			s_0	.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees		🔲	\$	
	Printing and Engraving Costs			\$	
	Legal Fees		🔽	\$	<u> 26;0</u> 00
	Accounting Fees		\Box	\$	
	Engineering Fees		🗀		
	Sales Commissions (specify finders' fees separately)		_		
	Other Expenses (identify)		_	\$	
	Total			\$ 0.	.00 26,000
			<u> </u>		

	C. OFFERING PRICE, NO	MBER OF INVESTORS, EXPENSES	AND USE OF TROCESSO	
	b. Enter the difference between the aggregate of and total expenses furnished in response to Part C proceeds to the issuer."	 Question 4.a. This difference is the 	"adjusted gross	\$
i.	Indicate below the amount of the adjusted gross peach of the purposes shown. If the amount for check the box to the left of the estimate. The total proceeds to the issuer set forth in response to Page 1997.	any purpose is not known, furnish of the payments listed must equal th	an estimate and	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	»	s \$ 400,000	\$
	Purchase of real estate		\$	S
	Purchase, rental or leasing and installation of m and equipment	•••••	_	
	Construction or leasing of plant buildings and f	acilities		□ \$ <u>178,000</u>
	Acquisition of other businesses (including the volfering that may be used in exchange for the as issuer pursuant to a merger)	sets or securities of another	s	s
	Repayment of indebtedness			
) Working capital			[] \$ 746,000
	Other (specify):		[] \$	□ \$
,			🗆 \$	924,000
	Total Payments Listed (column totals added)			1,324,000
	Total Payments Listed (column totals added)			1,524,000
		D. FEDERAL SIGNATURE		
ζN	ssuer has duly caused this notice to be signed by t ature constitutes an undertaking by the issuer to f information furnished by the issuer to any non-a	urnish to the U.S. Securities and Ex	change Commission, upon writte	
·u	er (Print or Type)	Signature	Date	124
Z	Dinvest, LLC	Q June K,	ـــ 🔞 کو کو	pt 0004
n	e of Signer (Print or Type)	Title of Signer (Print or Type)		
0	Rogers	Manager		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE							
1.	Is any party described in 17 CFF provisions of such rule?	2 230.262 presently subject to any of the di	squalification	Yes [No				
	,	See Appendix, Column 5, for state	response.						
2.	The undersigned issuer hereby un D (17 CFR 239.500) at such tim	dertakes to furnish to any state administrator es as required by state law.	r of any state in which this notice is	filed a no	otice on Form				
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.								
4.	limited Offering Exemption (UL	ts that the issuer is familiar with the condit OE) of the state in which this notice is filed to of establishing that these conditions have	and understands that the issuer cla						
	uer has read this notification and kno thorized person.	ows the contents to be true and has duly cause	ed this notice to be signed on its beh	alf by the	undersigned				
Issuer (Print or Type)	Signature	Date						
OZOinv	vest, LLC								
Name (Print or Type)	Title (Print or Type)	Title (Print or Type)						
Roo Re	ogers	Manager	Manager						

Manager

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AP	PENDIX				
1	Intend to non-a investor	2 I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
со									
СТ									
DE									
DC									
FL									
GA									
ні									
ID									
IL			-						
IN									
IA									
KS									
KY									
LA									
МЕ									
MD					_				
МА									
МІ									
MN				,					
MS									

APPENDIX 4 2 3 Disqualification under State ULOE Type of security (if yes, attach Intend to sell and aggregate explanation of offering price Type of investor and to non-accredited amount purchased in State waiver granted) offered in state investors in State (Part E-Item 1) (Part C-Item 2) (Part B-Item 1) (Part C-Item 1) Number of Number of Accredited Non-Accredited Yes No State Yes No Investors Amount Investors Amount MO MT NE NV NH NJ NM ŅY NC ND ОН OK OR PΑ RI SC SD TN TX UT VT VA WA WV WI

	APPENDIX .											
1		2	3		•	5 Disqualificatio						
	/to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and expanded amount purchased in State was (Part C-Item 2) (Part C-Item 2)			amount purchased in State					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No			
WY												
PR												

END